

LISTING OF CLAIMS

The following listing of claims will replace all prior versions and listings of claims in the application:

1. **(Currently Amended)** A method of bowel care, comprising:
chronically administering a therapeutically effective amount of a drug combination comprising an acetylcholinesterase inhibitor and an anti-cholinergic agent to a subject having chronic intestinal pseudo-obstruction to relieve chronic constipation, wherein the chronic intestinal pseudo-obstruction is a result of spinal cord injury.
2. **(Original)** The method of claim 1, wherein the acetylcholinesterase inhibitor is neostigmine, physostigmine, ambenonium, pyridostigmine, edrophonium, demecarium, echothiophate, or pralidoxime.
3. **(Original)** The method of claim 2, wherein the acetylcholinesterase inhibitor is neostigmine.
4. **(Original)** The method of claim 1, wherein the anti-cholinergic agent is glycopyrrolate, atropine, methscopolamine, homatropine, methantheline, propantheline, anisotropine, clidinium, hexocyclium, isopropamide, mepenzolate, oxyphenonium, or tridihexethyl.
5. **(Original)** The method of claim 4, wherein the anti-cholinergic agent is glycopyrrolate.
6. **(Original)** The method of claim 1, wherein the acetylcholinesterase inhibitor is neostigmine and the anti-cholinergic agent is glycopyrrolate.

7. **(Original)** The method of claim 6, wherein the therapeutically effective amount of the drug combination is about 1 mg to about 2 mg neostigmine and about 0.2 mg to about 0.4 mg glycopyrrolate.

8. **(Original)** The method of claim 6, wherein the therapeutically effective amount of the drug combination is a ratio of neostigmine to glycopyrrolate of about 2.5:1 to about 10:1 by weight.

9. **(Original)** The method of claim 8, wherein the therapeutically effective amount of the drug combination is a ratio of neostigmine to glycopyrrolate of about 5:1 by weight.

10 - 11. **(Canceled).**

12. **(Currently Amended)** The method of claim 1, wherein the ~~chronic intestinal pseudo-obstruction is an effect of spinal chord injury results in paraplegia or quadriplegia.~~

13. **(Original)** The method of claim 1, wherein the acetylcholinesterase inhibitor and the anti-cholinergic agent are administered at about the same time.

14. **(Original)** The method of claim 1, wherein the anti-cholinergic agent is administered about 1 to about 10 minutes after the acetylcholinesterase inhibitor.

15. **(Original)** The method of claim 1, wherein the method of administration of the acetylcholinesterase inhibitor is intramuscular injection, intravenous injection, rectal suppository, transnasal spray, sublingual tablets, or sublingual drops.

16. **(Original)** The method of claim 1, wherein the method of administration of the anti-cholinergic agent is intramuscular injection, intravenous injection, rectal suppository, transnasal spray, sublingual tablets, or sublingual drops.

17. **(Original)** The method of claim 1, wherein the acetylcholinesterase inhibitor and the anti-cholinergic agent are administered by the same method of administration.

18. **(Original)** The method of claim 17, wherein the method of administration is intramuscular injection, intravenous injection, rectal suppository, transnasal spray, sublingual tablets, or sublingual drops.

19. **(Original)** The method of claim 18, wherein the method of administration is intramuscular injection or intravenous injection.

20. **(Original)** The method of claim 1, wherein the chronic administration occurs at least one time per week over a period of at least one month.

21. **(Original)** The method of claim 20, wherein the chronic administration occurs over a period of at least six months.

22. **(Original)** The method of claim 1, wherein the chronic administration occurs at least three times per week over a period of at least one month.

23. **(Currently Amended)** A method of bowel care for a subject comprising:
identifying a subject having chronic intestinal pseudo-obstruction as an effect of spinal cord injury; and
co-administering to the subject a therapeutically effective amount of a drug combination comprising about 1 mg to about 2 mg of neostigmine and about 0.2 mg to about 0.4 mg glycopyrrolate at least one time per week for at least one month.

24. **(Canceled).**

25. **(Currently Amended)** The method of claim 24 23, wherein the drug combination is chronically co-administered at least three times per week.

26. **(Currently Amended)** The method of claim 24 23, wherein the drug combination is chronically co-administered for at least six months.

27-31. **(Canceled).**

32. **(New)** The method of claim 1, wherein chronically administering the therapeutically effective amount of the drug combination comprises chronically administering the drug combination intra-nasally.

33. **(New)** The method of claim 23, wherein the identifying the subject having chronic intestinal pseudo-obstruction as an effect of spinal chord injury comprises selecting a subject who does not have acute-intestinal pseudo-obstruction.

34. **(New)** The method of claim 23, wherein co-administering the drug combination comprises co-administering the drug combination intra-nasally.